

*FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT -
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000015179 (1)

1. Corporation Name

INTERNATIONAL EDUCATION NETWORK, INC.



Principal Place of Business

Mailing Address

ROUTE 3, BOX 3546
QUINCY FL 32351

ROUTE 3, BOX 3546
QUINCY FL 32351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/23/1995

4. FEI Number

59-3273907

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

JOHNSON, PATRICIA
RT. 3 BOX 3546
QUINCY FL 32351

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 343 America Ave

84 Coral Gables, FL 33134

85 Zip Code 33144

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SPIEGEL & UTRERA, P.A., d/b/a

SIGNATURE: Natalia Utrera, Vice President AmeriLawyer

Signature typed on this form and signed by the individual whose signature is required when reinstating

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME JOHNSON, PATRICIA A
STREET ADDRESS ROUTE 3, BOX 3546
CITY-ST-ZIP QUINCY FL 32351

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

100002427841--7

TITLE ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME SIMMONS, DAYMON B
STREET ADDRESS ROUTE 3, BOX 3546
CITY-ST-ZIP QUINCY FL 32351

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

-02/11/98--0108-004

***150.00 ***150.00

TITLE ☒ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME HARGRAVES, TONY
STREET ADDRESS ROUTE 3, BOX 3546
CITY-ST-ZIP QUINCY FL 32351

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☒ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME BOB, ERMA
STREET ADDRESS ROUTE 3, BOX 3546
CITY-ST-ZIP QUINCY FL 32351

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME JOHNSON, LEON
STREET ADDRESS ROUTE 3, BOX 3546
CITY-ST-ZIP QUINCY FL 32351

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

GL-10-98

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Natalia Utrera

1/23/98

CR2E034 (10/97)